MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 10/53702●

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ᵈ AMENDMENT		AFTER 2ᵈ AMENDMENT			AS FILED		AFTER 1ᵈ AMENDMENT		AFTER 2ᵈ AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/				51						
2				/			52						
3		(3)					53						
4				/			54						
5		Ø		/			55						
6	/			/			56						
7							57						
8		Ø		/			58						
9		Ø		/			59						
10		Ø		/			60						
11	/	Ø		/			61						
12	/			/			62						
13		/		/			63						
14		/		/			64						
15				/			65						
16		Ø		/			66						
17		Ø					67						
18							68						
19							69						
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40							90						
41							91						
42							92						
43							93						
44							94						
45							95						
46							96						
47							97						
48							98						
49							99						
50							100						
TOTAL IND.			3				TOTAL IND.						
TOTAL DEP.			14				TOTAL DEP.						
TOTAL CLAIMS			17				TOTAL CLAIMS						

PTO - 1360 (REV. 11/04)